## P07000015043

(Re	equestor's Name)	
(Ac	ldress)	
(Address)		
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	ertified Copies Certificates of Status	
Special Instructions to	Filing Officer:	

Office Use Only



900112260829

11/26/07--01011--033 \*\*35.00

RA Wich

NOV 26 PN 2:

T. Reserts NOV 28 2007

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Bella Colon (Name of Corpo	bia Inc.
DOCUMENT NUMBER: PO 70000	15043
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to t	the following:
MARCO Lo (Name of Contact	pez t Person)
Bella Colo (Firm/Compa	any)
3431 Bonita Beach	n Rd. Sinte 210
Bonita Sprin	igs FL. 34134
For further information concerning this matter, please call:	
(Name of Contact Person)	t (239 ) 919 - 9415 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departmen	nt of State
2 September 1	(1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

CR2E045 (8/05)

\$15. 29 July 20

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bella Colombia LNC.
2. The principal office address: 3431 Bonita Beach Rd. Suite 210
Bonita Springs, FL 34134
3. The mailing address (if different):
4. Date of incorporation/qualification: 2 1/2007 Document number: Po 70 000 15043
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Masca Longza EEE 9
7114 41ST ST SU)
-2144 413 51. 5W ASE 28 I
MARCO LOPEZ  2144 415T ST. SW  Naples, FL. 34116  RECRETARY OF PRESENCE OF PRE
6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Leon PALACIO 3431 Boxita Beach Rd Sinte 210
(P.O. Box NOT acceptable)
BONITA SpRINGS, FL. 34134
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director)  Leon PALACIO - DIRECTOR  (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
V / 2 / 11-9-07
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)